

POSITION	INITIALS	ID NO.	DATE
<b>FEE DETERMINATION</b>			
<b>O.I.P.E. CLASSIFIER</b>		15	33, 37, 38
<b>FORMALITY REVIEW</b>			

### INDEX OF CLAIMS

✓	Rejected	N	Not elected
=	Allowed	I	Interference
— (Through numeral)	Canceled	A	Appeal
⋮	Restricted	O	Objected

Claim	Final Original	Date	Claim	Final Original	Date	Claim	Final Original	Date
1	1	7/16/00	51	51		110	110	
2	2		52			111	111	
3	3		53			112	112	
4	4		54			113	113	
5	5		55			114	114	
6	6		56			115	115	
7	7		57			116	116	
8	8		58			117	117	
9	9		59			118	118	
10	10		60			119	119	
11	11		61			120	120	
12	12		62			121	121	
13	13		63			122	122	
14	✓		64			123	123	
15			65			124	124	
16			66			125	125	
17			67			126	126	
18			68			127	127	
19			69			128	128	
20			70			129	129	
21			71			130	130	
22			72			131	131	
23			73			132	132	
24			74			133	133	
25			75			134	134	
26			76			135	135	
27			77			136	136	
28			78			137	137	
29			79			138	138	
30			80			139	139	
31			81			140	140	
32			82			141	141	
33			83			142	142	
34			84			143	143	
35			85			144	144	
36			86			145	145	
37			87			146	146	
38			88			147	147	
39			89			148	148	
40			90			149	149	
41			91			150	150	
42			92					
43			93					
44			94					
45			95					
46			96					
47			97					
48			98					
49			99					
50			100					

If more than 150 claims or 10 actions  
staple additional sheet here

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